



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION

Division of Water Resources

 William R. Snodgrass Tennessee Tower, 312 Rosa L. Parks Avenue, 11th Floor, Nashville, Tennessee 37243
 1-888-891-8332 (TDEC)

Notice of Intent (NOI) for General NPDES Permit for Stormwater Discharges from Construction Activities (TNR100000)

Site or Project Name: Aspen Dental		NPDES Tracking Number: TNR 134968	
Street Address or Location: 375 Kelsey Ln. Lenoir City, TN		Construction Start Date: 10/15/2016	
Site Description: Retail development for a dental office		Estimated End Date: 9/15/2017	
County(ies): Loudon		Latitude (dd.dddd): 35.822237	
MS4 Jurisdiction (if applicable): TNS077798		Longitude (-dd.dddd): -84.268416	
		Acres Disturbed: 1.29	
		Total Acres: 1.29	
Check the appropriate box(s) if there are streams and/or wetlands on or adjacent to the construction site: Streams <input type="checkbox"/> Wetlands <input type="checkbox"/>			
If wetlands are located on-site and may be impacted, attach wetlands delineation report.			
If an Aquatic Resource Alteration Permit (ARAP) has been obtained for this site, what is the permit number?			
Receiving waters: Town Creek			
Attach the SWPPP with the NOI: SWPPP Attached <input checked="" type="checkbox"/>		Attach a site location map: Map Attached <input checked="" type="checkbox"/>	
Site Owner/Developer (Primary Permittee): (Provide person, company, or entity that has operational or design control over construction plans and specifications): 1419 Parkway, LLC - Developer			
For corporate entities only, provide correct Tennessee Secretary of State (SOS) Control Number: (an incorrect SOS control number may delay NOI processing)			
Site Owner or Developer Contact Name: (individual responsible for site) David Ogle		Title or Position: (the party who signs the certification below) Owner	
Mailing Address: 1629 Parkway		City: Sevierville	State: TN Zip: 37862
Phone: (865) 389-4600	Fax: ()	E-mail: david.ogle@fiveoaksdevelopment.net	
Optional Contact: Don Hubbard		Title or Position: Construction Manager	
Mailing Address: (same as above)		City:	State: Zip:
Phone: (865) 389-4600	Fax: ()	E-mail: donthebuilder@bellsouth.net	
Owner/Developer Certification: (must be signed by president, vice-president or equivalent, or ranking elected official) (Primary Permittee)			
I certify under penalty of law that this document and all attachments were prepared by me, or under my direction or supervision. The submitted information is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.			
Owner/Developer Name: (print/type) David Ogle		Signature:	Date: 9/12/16
Contractor(s) Certification: (must be signed by president, vice-president or equivalent, or ranking elected official) (Secondary Permittee)			
I certify under penalty of law that I have reviewed this document, any attachments, and the SWPPP referenced above. Based on my inquiry of the construction site owner/developer identified above and/or my inquiry of the person directly responsible for assembling this NOI and SWPPP, I believe the information submitted is accurate. I am aware that this NOI, if approved, makes the above-described construction activity subject to NPDES permit number TNR100000, and that certain of my activities on-site are thereby regulated. I am aware that there are significant penalties, including the possibility of fine and imprisonment for knowing violations, and for failure to comply with these permit requirements. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.			
Contractor name, address, and SOS control number (if applicable): Five Oaks/Ogle, Inc. (David Ogle) 1629 Parkway, Sevierville, TN		Signature:	Date: 9/12/16
Contractor name, address, and SOS control number (if applicable):		Signature:	Date:
OFFICIAL STATE USE ONLY			
Received Date: 9/23/16	Reviewer: VKM	Field Office: KEFO	Permit Tracking Number: TNR 134968
Fee(s): \$850-	T & E Aquatic Flora/Fauna:	SOS Corporate Status:	Waters with Unavailable Parameters:
		Exceptional TN Water:	
		Notice of Coverage Date:	

Site ID # 11113